Form	8879	
Form	0015	

IRS e-file Signature Authorization

OMB No. 1545-0074

Department of the Treasury		
Internal Revenue Service		

► ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpayer's name	Social security	number	
AMOL T PATIL 725-88-1			
Spouse's name	Spouse's social security number		
HARSHADA A PATIL	855-96-3	3361	
Part I Tax Return Information - Tax Year Ending December 31, 2019 (Whole of	ollars only)		
1 Adjusted gross income (Form 1040 or 1040-SR, line 8b; Form 1040-NR, line 35)		1	186,475
2 Total tax (Form 1040 or 1040-SR, line 16; Form 1040-NR, line 61)			23,304
3 Federal income tax withheld from Forms W-2 and 1099 (Form 1040 or 1040-SR, line 17; F			
line 62a)			21,287
4 Refund (Form 1040 or 1040-SR, line 21a; Form 1040-NR, line 73a; Form 1040-SS, Part I, line 13a)			
5 Amount you owe (Form 1040 or 1040-SR, line 23; Form 1040-NR, line 75)			2,017
Part II Taxpayer Declaration and Signature Authorization (Be sure you get an		v of your re	
statements for the tax year ending December 31, 2019, and to the best of my knowledge and belief, they are the declare that the amounts in Part I above are the amounts from my electronic income tax return. I consent to all transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the d the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct deb account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a p financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financia cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I a involved in the processing of the electronic payment of taxes to receive confidential information necessary to a related to the payment. I further acknowledge that the personal identification number (PIN) below is my signatu and, if applicable, my Electronic Funds Withdrawal Consent.	w my intermediat an acknowledge ate of any refund t) entry to the fina ayment of estima notify the U.S. Tr al Agent at 1-888 Iso authorize the nswer inquiries ar	e service providement of receipt If applicable, I ancial institution ted tax, and the easury Financia - 353-4537. Pay financial institut d resolve issue	der, or reason authorize al /ment ions s
Taxpayer's PIN: check one box only			
x lauthorize ADVANTAGE ONE TAX CONSULTING INC to enter or generate	my PIN 27	909	as my
ERO firm name Ente			
signature on my tax year 2019 electronically filed income tax return.	don	't enter all zeros	
 ☐ I will enter my PIN as my signature on my tax year 2019 electronically filed income tax r entering your own PIN and your return is filed using the Practitioner PIN method. The E Your signature ► Date ► 	RO must comp	-	-
Spouse's PIN: check one box only			
x I authorize ADVANTAGE ONE TAX CONSULTING INC to enter or generate ERO firm name signature on my tax year 2019 electronically filed income tax return.	Ente	598 er five digits, but 't enter all zeros	
I will enter my PIN as my signature on my tax year 2019 electronically filed income tax r entering your own PIN and your return is filed using the Practitioner PIN method. The E		-	-
Spouse's signature ► Date ►			
Practitioner PIN Method Returns Only - continue below			
Part III Certification and Authentication - Practitioner PIN Method Only			
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	540893-3650 Don't en	6 iter all zeros	
I certify that the above numeric entry is my PIN, which is my signature for the tax year 2019 electronically filed i indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitic Handbook for Authorized IRS <i>e-file</i> Providers of Individual Income Tax Returns.			(s)
ERO's signature > Date >	03-10-2	020	
ERO Must Retain This Form - See Instructions	03-10-2	V2V	
Don't Submit This Form to the IRS Unless Requested To	Do So		